## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000001401

Entity Name: OPTIMUM HEALTHCARE IT, LLC

**Current Principal Place of Business:** 

1300 MARSH LANDING PKWY SUITE 105 JACKSONVILLE, FL 32250

## **Current Mailing Address:**

1300 MARSH LANDING PKWY SUITE 105 JACKSONVILLE, FL 32250 US

FEI Number: 45-4481569 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KIRSCHNER, KENNETH M 1431 RIVERPLACE BOULEVARD SUITE 910 JACKSONVILLE, FL 32202 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Jun 29, 2020

**Secretary of State** 

9226517503CC

## Authorized Person(s) Detail:

Title MANAGING MEMBER
Name TSC COMPANIES, LLC

Address 1300 MARSH LANDING PKWY

SUITE 105

City-State-Zip: JACKSONVILLE FL 32250

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KENNETH M KIRSCHNER

**SECRETARY** 

06/29/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date